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APPLICANTS
 Victor M. Casella, Pleasanton, CA;
 Thomas Walter Kaaret, Pleasanton, CA;
 Scott C. Mills, Pleasanton, CA;
 Gregory van Buskirk, Pleasanton, CA;
 Malcolm DeLeo, Pleasanton, CA;
 Cheryl H. Rodriguez, Pleasanton, CA;

**** CONTINUING DATA ******* *None PK*

**** FOREIGN APPLICATIONS ******* *None PK*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 06/27/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 0	TOTAL CLAIMS 71	INDEPENDENT CLAIMS 5
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Verified and Acknowledged
 Examiner's Signature: *[Signature]* Initials: *PK*

ADDRESS
27019

TITLE
Fabric treatment for stain release

FILING FEE RECEIVED 2330	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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